STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE

Please type or print in lnk.		2018 MAR	26 6411:23 (MIDDLE)
NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
NG0	GARY		
1. Office, Agency, or Court			基础设施。
Agency Name (Do not use acronyms)		A	
Division, Board, Department, District, if applica	able	Your Position	Emgineer
Division, Board, Department, District, if applicable Division of Oil Gas and Gesthermal Resources			
► If filing for multiple positions, list below or o			
Agency:		Position:	
2. Jurisdiction of Office (Check at lease	st one box)	enidikuniaanainan (duberinti, ^{selega et} et e), ee ellema /a. ée idire et est e	
∑ State		☐ Judge or Court Commissioner (Stat	ewide Jurisdiction)
Multi-County	V	County of	· ·
☐ City of		Other	
3. Type of Statement (Check at least of		_	
Annual: The period covered is January December 31, 2017.	1, 2017, through	Leaving Office: Date Left (Check one)	
The period covered is/_ December 31, 2017.	, through	 The period covered is January leaving office. 	1, 2017, through the date of
Assuming Office: Date assumed	Assuming Office: Date assumed/, through the date of leaving office.		
Candidate: Date of Election	and office sought	, if different than Part 1:	
4. Schedule Summary (must comp	lete) > Total number	of pages including this cover pag	Α'
Schedules attached	Total Hambon	or pages moraumy and sever pag	
Schedule A-1 - Investments schedu	ıle attached Γ	Schedule C - Income, Loans, & Business	Positions schedule attached
		Schedule D - Income - Gifts - schedule attached	
Schedule B - Real Property - schedu	lle attached	☐ Schedule E - Income – Gifts – Travel Pay	ments - schedule attached
-or-			
None - No reportable interests of	n any schedule		
5. Verification MAILING ADDRESS STREET	OUT /		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Doc		STATE	ZIP CODE
	treet CA, 9	F-MAIL ADDRESS	
1916) 324-2519		E-MAIL ADDRESS Chary. Ngo & Conserve	Lion, CA. Gov
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date Signed 3/26/18	ć	Signature Pary Ny	ggadegete gene (Staffenderinaria su _{n + y} ,
(month, day, year)		(File the originally signed statemen	nt with your filing official.)